

15 APR 17 PM 1:51

Office Use Only

**FEC  
FORM 3**

**REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For An Authorized Committee

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

Friends of Barbara Boxer

ADDRESS (number and street) ▼

777 S. Figueroa Street, Suite 4050

☐ Check if different than previously reported. (ACC)

Los Angeles

CA

90017

2. FEC IDENTIFICATION NUMBER ▼

C C00279315

3. IS THIS REPORT



NEW (N)

OR



AMENDED (A)

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

CA

00

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

(b) 12-Day PRE-Election Report for the:



Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

MM / DD / YYYY

MM / DD / YYYY

MM / DD / YYYY

in the State of

CA

(c) 30-Day POST-Election Report for the:



General (30G)



Runoff (30R)



Special (30S)

Election on

MM / DD / YYYY

MM / DD / YYYY

MM / DD / YYYY

in the State of

CA

5. Covering Period

MM / DD / YYYY  
01 / 01 / 2015

MM / DD / YYYY  
01 / 01 / 2015

MM / DD / YYYY  
01 / 01 / 2015

through

MM / DD / YYYY  
03 / 31 / 2015

MM / DD / YYYY  
03 / 31 / 2015

MM / DD / YYYY  
03 / 31 / 2015

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Stephen J. Kaufman

Signature of Treasurer

Stephen J. Kaufman

Date

MM / DD / YYYY  
01 / 30 / 2015

MM / DD / YYYY  
01 / 30 / 2015

MM / DD / YYYY  
01 / 30 / 2015

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

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**FEC FORM 3**  
(Revised 02/2003)